

# PULSE

PHILANTHROPY IN ACTION | SUMMER 2024

## ROOM to GROW



# THE FUTURE OF MEDICINE IN VIRGINIA

## PAUL AND DIANE MANNING INSTITUTE OF BIOTECHNOLOGY

In December 2023, ground was broken for the new Manning Institute, a state-of-the-art facility located in UVA's Fontaine Research Park and made possible by a generous gift from Paul and Diane Manning. The institute will position UVA at the forefront of medical research such as cellular and gene therapies that revolutionize how diseases are treated and cured.

Help UVA transform the future of healthcare by making a gift at [giving.uvahealth.com](https://giving.uvahealth.com) or contacting the UVA Health Foundation at 800.297.0102 for more information.

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### UVA HEALTH DEVELOPMENT COMMUNICATIONS

Rick Kessel, *Senior Director of Communications*  
Katherine Ludwig, *Senior Writer*  
Alex Monson, *Assistant Director of Communications*  
Karen Moore, *Advancement Associate*

**Designer:** Meg Walker, *Assistant Creative Director*

**Contributors:** William Cocke, Erin Hughley-Commers, Meghan Goff, Rick Kessel, Andy Levinsky, Katherine Ludwig, Alex Monson, Kim Wendel

**Photo Contributors:** Dan Addison, Jeneene Chatowsky, Tom Daly, Elkus Manfredi Architects, Christopher Michel, Sanjay Suchak, Coe Sweet, UVA Health Marketing

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**DR. LEIGH CANTRELL**, associate director for clinical affairs at UVA Comprehensive Cancer Center and physician lead of the UVA Health oncology service line

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# A MOMENT *of* CELEBRATION

*from UVA Health CEO K. Craig Kent, MD*

**UVA Health has much to celebrate in 2024.** In this edition of *PULSE* magazine, I invite you to join me in celebrating a few of our recent accomplishments.

Earlier this year, I marked four years leading UVA Health. We have seen remarkable change during that time, and our mission to transform health and inspire hope remains at the forefront of everything we do. As always, I am incredibly grateful to our 18,000 team members who serve our patients and communities every day.

I am excited about and proud to share some of our outstanding accomplishments that add to our scientific knowledge and improve patient outcomes.

Earlier this year, the Blue Ridge Institute for Medical Research recognized the UVA School of Medicine for its significant increase in annual federal research funding—from \$155 million in 2022 to \$174 million in 2023. This places the school 19th in the nation among all public schools of medicine. We are just beginning, and you should anticipate seeing further growth in the years to come.

UVA's Paul and Diane Manning Institute of Biotechnology, scheduled to open in 2026, is one of our most important initiatives. It reflects our commitment to expanding the scope of our high-impact translational research. We are actively recruiting a world-class team of translational scientists who will invent tomorrow's innovative therapies that will extend and improve our patients' lives.

A recent \$30 million gift from the family of the late David and Mary Harrison, two of the University of Virginia's most generous benefactors, will establish the Harrison Family Translational Research Center in Alzheimer's and Neurodegenerative Diseases within the Manning Institute. The Harrison gift allows us to recruit preeminent scholars and create a dedicated physical space for translational discoveries in the neurosciences.

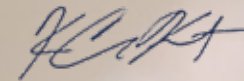
Another exciting project is the expansion of the neonatal and pediatric intensive care units (NICU and PICU) at UVA Health University Medical Center, which will allow us to accept more transfer patients with complex conditions. Over the last four years, the number of babies born at UVA Health Children's has increased significantly. Meanwhile, we are forced to turn away more than 20% of the families seeking immediate critical care for their babies and children because of a lack of space. Put simply, this expansion will save lives and offer hope to many more families. We are grateful for the continuing

generosity of community members who are helping to support this expansion.

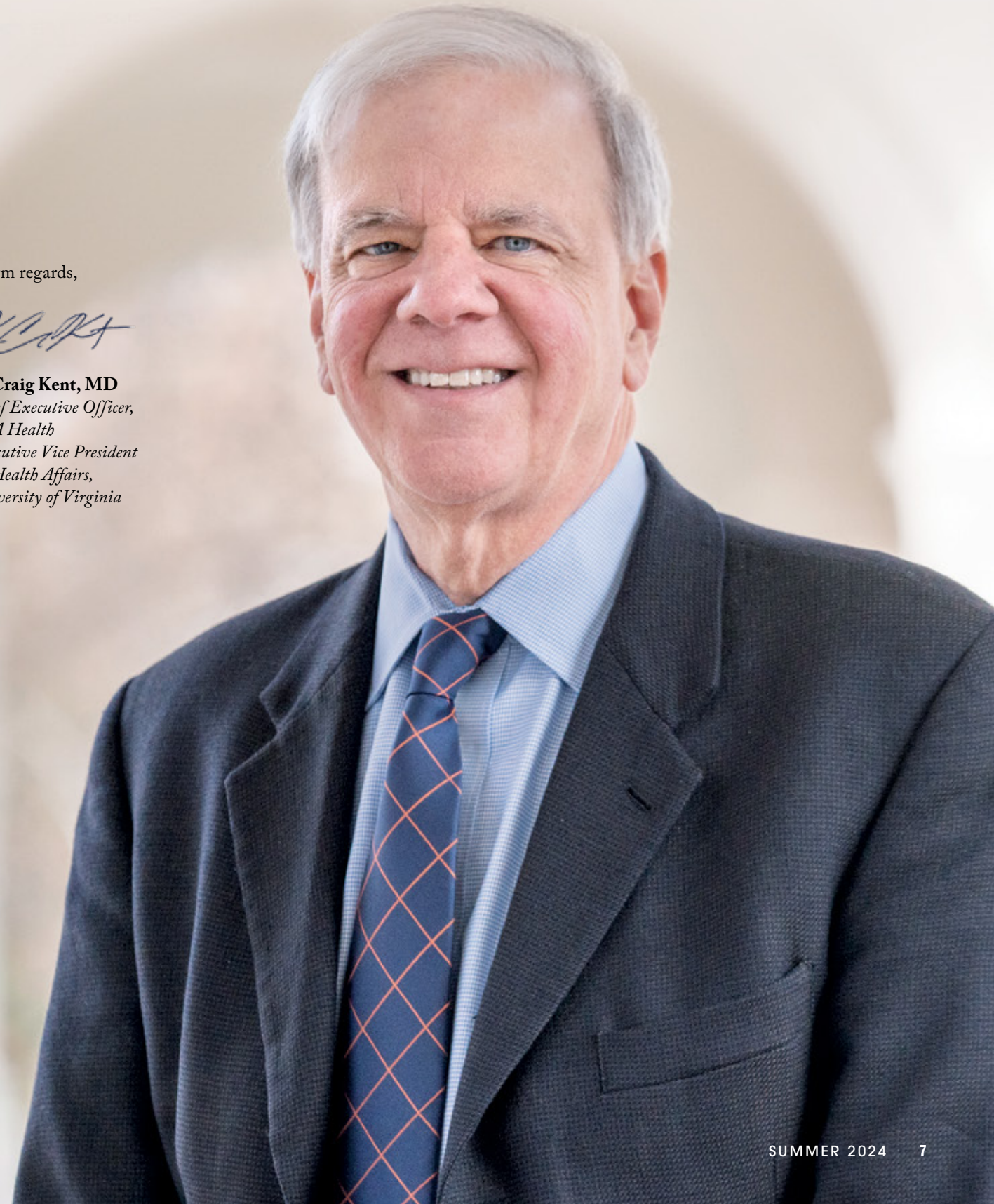
Our recent statewide growth has fostered new patient care relationships, exemplified by enhanced care coordination when patients are shared across our health system. One case involving our NICU illustrates how telemedicine has become an effective way to communicate between physicians at our four hospitals. A baby in our UVA Health Prince William Medical Center NICU was recently born with suspected life-threatening birth defects, esophageal atresia and tracheoesophageal fistula. A diagnosis was made through telemedicine with a NICU expert at UVA Health Children's, and the patient was then transferred to our 700-bed quaternary care center for surgery. The parents were so grateful to have immediate access to experts who routinely care for this complex condition. This is the type of care coordination that UVA will provide as we increase our footprint across the state of Virginia—the very essence of our mission.

Our ultimate goal, of course, is to provide excellent care to the millions of patients who access UVA Health each year. Many of you are patients, and you or your loved ones have received care across our many facilities. We sincerely appreciate your partnership as you contribute to research and medical advances, our educational mission, or our outstanding clinical care. Thank you for being part of UVA Health!

Warm regards,



**K. Craig Kent, MD**  
*Chief Executive Officer,  
UVA Health  
Executive Vice President  
for Health Affairs,  
University of Virginia*





# NEWS BRIEFS



## SCHOLARSHIPS *for* FUTURE PHYSICIANS

In February, the University of Virginia School of Medicine announced a new initiative to raise \$25 million for additional student scholarships as part of the University's Honor the Future campaign. This vital fundraising initiative aligns with UVA Health's 2022-2032 strategic plan, One Future Together: Health and Hope for All, which acknowledges the importance of UVA's world-class medical education and training programs in preparing next-generation health professionals to meet our community's greatest needs.

"Increasing student scholarships is one of our most important goals," said Melina Kibbe, MD, dean of the UVA School of Medicine and chief health affairs officer of UVA Health. "Scholarships are vital for recruiting the most promising future physicians regardless of their finances, including those from backgrounds underrepresented in medical school and our medical profession, and empowering them to reach their fullest potential."

*"The scholarship I received from UVA made my dream medical school also the most affordable medical school, making it an easy decision."*

—JEFFREY BELLINGER

## BREAKING BREAD

Over the past decade, locally owned Panera Bread locations have raised more than \$1 million for UVA Health Children's, supporting initiatives from creating the Panera Family Lounge and a pediatric oncology fellowship to the pediatric transplant program and Patient and Family Centered Care program. Last year's "Change 4 Children" campaign broke records, raising nearly \$40,000. In February, this year's fundraiser got off to a fast start with a new focus: expanding the neonatal and pediatric intensive care units (NICU and PICU) to accommodate burgeoning demand at Virginia's No. 1 children's hospital. "Change 4 Children" enables diners at Panera Bread locations in Charlottesville, Blacksburg, Christiansburg, Culpeper, Harrisonburg, Lynchburg, and Waynesboro to round up purchases to a whole dollar amount to benefit UVA Health Children's.

## GIFT MILESTONES

**BONNIE AND WICK MOORMAN** made a commitment to benefit the Department of Psychiatry and Neurobehavioral Sciences. Their gift will establish a Psychiatric Strategic Advancement Fund to help attract clinical research experts; a Psychiatric Research Seed Fund to support high-risk, high-reward research and facilitate further funding; a Perinatal Mood Disorders Clinic Startup Fund to meet the critical mental health needs of new mothers; and the newly created Zachariah C. Dameron III Endowed Lectureship in Psychiatry to enhance the Department's educational programming for faculty, staff, and trainees.

**CAROL R. ANGLE** has made a gift to endow the Daniel M. Becker Professorship in Geriatric Research and create the Matthew J. Goodman, MD, Geriatric Research Seed Fund. Her investment will enable the Department of Medicine's Division of General, Geriatric, Palliative, and Hospital Medicine to support a leading investigator in geriatrics research. It will also provide critical resources for the chairholder to advance the most promising geriatrics research within the division and across UVA Health.

**NINA AND KEN (COL '75, MED '79) BOTSFORD** made a commitment to create the Nina and Ken Botsford Bicentennial Professorship in Neurology to be held in perpetuity by the chair of the Department of Neurology. Xuemei Huang, MD, PhD, a distinguished leader, clinician, educator, and scientist, was recently appointed to this position and is slated to begin on August 1. Additionally, the Botsfords will create the Nina and Ken Botsford Research Fund in Neurology through their estate to fuel groundbreaking research in Alzheimer's, Parkinson's, and other neurodegenerative disorders to benefit future patients.





## SHARKS, *on* YOUR MARKS...

**\$500,000 in prize money was only part** of the stakes in the UVA School of Medicine Shark Tank Competition, a highlight of the February 2024 research retreat exploring “Emerging Approaches and Biotechnologies.” Five teams made their pitches to the Sharks, who peppered participants with questions. The audience then cast their votes. Two third-place winners each received \$50,000, the second-place team took away \$100,000, while awards of \$150,000 went to two first-place winners. One of the first-place teams was led by Loren Erickson, PhD, Associate Professor, Microbiology, Immunology, and Cancer Biology. Dr. Erickson said his team “sought to understand how

bites from the Lone Star tick lead to the development of allergic reactions to a sugar found in mammals, such as red meat, and why this is also a potential risk factor for coronary artery disease.” Another first-place award went to Jennifer Payne, MD, Professor, Psychiatry and Neurobehavioral Sciences, and her team, who identified blood-based biomarkers that can predict with 80% accuracy who will develop postpartum depression. Her research, she said, will “help us understand how postpartum depression develops from a biological perspective and lead to improved treatments and outcomes.”

—  
First-place winning teams of the Shark Tank competition along with the Sharks and the leadership team

## LIGHTING *the* WAY

**Olivia’s Light, a non-profit supporting children with genetic disorders,** medical complexities, and severe disabilities, has donated \$51,000 to UVA Health Children’s. The gift will cover pediatric testing for families based on financial need, determined partly by insurance coverage. The remaining funds are designated toward the highest needs in pediatric genetics.

The organization was founded by Jenna and Ben King, whose daughter, Olivia, underwent genetic testing at UVA Health Children’s. At six weeks, Olivia was diagnosed with an EEF1A2-related neurodevelopmental brain disorder, an extremely rare terminal condition.

“While this was our family’s worst nightmare, there was definitely a sense of peace in knowing the truth and being able to make informed decisions moving forward,” Jenna wrote. “On behalf of our late daughter and a community that supported our fundraising efforts, we are giving others the gift we were given—broad genetic testing for patients with a financial need.” ■





# COMMITMENT to LONGEVITY

*The Harrison family's \$55 million gift benefits Alzheimer's research and Virginia Athletics.*

**THE FAMILY OF THE LATE DAVID AND MARY HARRISON**, two of the University of Virginia's most generous benefactors, made a pair of commitments totaling \$55 million. This extraordinary gift includes \$30 million to create a leading-edge translational research program dedicated to the next generation of therapies for Alzheimer's and related diseases, and \$25 million to the Olympic Sports Center in the Department of Athletics.

The new Harrison Family Translational Research Center in Alzheimer's and Neurodegenerative Diseases will be housed in the new Paul and Diane Manning Institute of Biotechnology. The gift for the research center is provided by the Harrison Foundation and the Mary Anderson Harrison Foundation. The naming of the centers is pending approval by the Board of Visitors.

The other portion of the funds is designated to create the Harrison Family Olympic Sports Center, scheduled to open in the summer of 2025. This facility will be centrally located in the athletics precinct. It will feature a performance training center, strength and conditioning facilities, tutoring and academic support spaces, and a hall of champions.

UVA President Jim Ryan announced the gift during the February 29 meeting of the Board of Visitors.

"The Harrison family's incredibly generous commitments will provide robust support for UVA students and faculty and will help foster and coordinate important work on neurodegenerative disease," Ryan said. "I'm deeply grateful to the Harrisons for their decades of giving to UVA and

for their investments in key areas of the strategic plan. The impact of their giving will be felt on Grounds for generations to come."

Speaking on behalf of the family, Marjorie Harrison Webb, president of the Harrison Foundation, said: "We are pleased to lend our support to two areas of the University that will increase opportunities for students and faculty to thrive. Student-athletes embody the full promise of a UVA education, while a research center devoted to the understanding and treatment of neurodegenerative diseases will allow UVA researchers to lead the way in the fight against these devastating illnesses."

The gift creating the research center will allow UVA to develop a national research program in Alzheimer's and other neurodegenerative diseases. Within the University's research ecosystem, the center will create a nexus between the UVA Brain Institute, which encompasses all neurological research at the University, and the Manning Institute of Biotechnology, which will translate fundamental discoveries in health science into therapies for a broad range of illnesses.

The center's aim is to enable physicians and scientists in the fields of Alzheimer's, other dementias, and neurodegenerative disorders to make their translational discoveries at UVA for the benefit of patients and families. The Harrison family's gift will create the building blocks for this new research program by supplying support for faculty and other researchers and building out a collaborative research environment.



Mary and David Harrison in the mid-1980s

**"A research center devoted to the understanding and treatment of neurodegenerative diseases will allow UVA researchers to lead the way in the fight against these devastating illnesses."**

— MARJORIE HARRISON WEBB



**The threefold plan includes \$5 million**

to create the Harrison Family University Professorship in Neuroscience, which will enable the president, provost, and CEO of UVA Health to recruit a preeminent scholar to lead the center. This portion of the funding is eligible for a dollar-for-dollar match from the University's Bicentennial Professorships Fund for a total potential impact of \$10 million.

An additional \$5 million will support an endowed chair—the Harrison Family Professorship in Neurodegenerative Diseases—and postdoctoral fellows, staff, and research support. The naming of the endowed chairs is pending approval by the Board.

Finally, \$20 million of the gift will create a dedicated space for the research center within the Manning Institute building. Construction for this 350,000-square-foot research facility began in December 2023. By concentrating expertise across several disciplines, connecting UVA's current investigators with new recruits to broaden research capacity and channeling discoveries into new translational therapies, the new space within the Manning Institute will enable UVA to expand the size and breadth of its program in the field of neurodegenerative diseases and raise its national profile.

"The Harrison family's generous contribution underscores the importance of the neurosciences as an area of focus within the Paul and Diane Manning Institute of Biotechnology," said Dr. K. Craig Kent, CEO of UVA Health and executive vice president for health affairs at UVA. "This funding enables UVA to continue to assemble a world-class team of researchers primed to deliver transformative breakthroughs in the neuroscience fields with advancements that will offer hope to millions of families impacted by Alzheimer's and other neurodegenerative diseases." ■

The Paul and Diane Manning Institute of Biotechnology, view from the north

©Elkus Manfredi Architects

**INAUGURAL DIRECTOR ANNOUNCED:**

On May 21, 2024, UVA Health announced that UVA Alzheimer's researcher John Lukens, PhD, will serve as the inaugural director of the Harrison Family Translational Research Center in Alzheimer's and Neurodegenerative Diseases. He will oversee the launch of a cutting-edge translational research program to develop the next generation of treatments for Alzheimer's and related neurodegenerative disorders. Lukens has been part of the UVA School of Medicine's Department of Neuroscience since 2014. He is renowned for having conducted groundbreaking research charting the crucial role of the immune system in brain injury and neurodegenerative disorders.

*"The impact of their giving will be felt on Grounds for generations to come."*

— UVA PRESIDENT JIM RYAN





# ALL TOGETHER NOW

*Coordinated care among the University Medical Center, community hospitals, and clinics is the key to One UVA Health.*

By **Andy Levinsky**

**“I’VE HAD A FRONT-ROW SEAT TO WATCH UVA BRING ITS FOOTPRINT ACROSS NORTHERN VIRGINIA.”**

— MICHELLE STRIDER

**A 2020 NATIONAL STUDY FOUND THAT THE TOP THREE REASONS PATIENTS CHOOSE A PARTICULAR HOSPITAL ARE ITS REPUTATION, LOCATION, AND RECOMMENDATIONS FROM THEIR PRIMARY CARE PHYSICIANS.** What if the hospital in your community was interconnected with the one your internist recommends for the most comprehensive services? Suppose you could receive the same level of care wherever you are?

What began in 2016 as a partnership between UVA Health and Novant Health to operate Culpeper Medical Center, Haymarket Medical Center, and Prince William Medical Center has evolved into a model of coordinated care. Since UVA Health acquired full ownership of the combined entity in 2021, UVA Health’s flagship University Medical Center in Charlottesville, the three community hospitals, and a growing network of clinics statewide have evolved into a seamless system. Today, regardless of location, patients have equal access to a world-class academic medical center, including the first National Cancer Institute-designated Comprehensive Cancer Center and the No. 1 pediatric hospital in Virginia.

UVA Community Health Chief Medical Officer **Zan Zaidi, MD**, defines *coordinated care* as anticipating the needs of patients and “helping them navigate a complicated healthcare system that sometimes involves primary care, sometimes specialty care, sometimes emergency care, what comes before, what comes after.”





Dr. Zaidi is pictured here with a patient, Keylin Soto, whose story illustrates the extraordinary impact of coordinated care. Soto, a 24-year-old mother of a 6-year-old son, was approaching the third trimester of her second pregnancy when she was diagnosed with a large pelvic mass. She was receiving prenatal care at a community clinic but required specialty care. Her mass was growing, and she was in pain; nonetheless, she was initially unable to get an appointment. The day after the clinic referred Soto to UVA Health, she had an ultrasound in the morning and an appointment with a gynecological oncologist that afternoon. Five days after her referral, she had a successful operation in Charlottesville, and three months later, she delivered a healthy baby at UVA Health Prince William Medical Center in Manassas.



Providing patients like Soto with timely treatment from the most eminent specialists requires deft coordination and the ability to develop relationships between providers. Dr. Zaidi's counterpart on the nursing side, Michelle Strider, RN, BSN, MBA, CPHQ, described her role in integrating care as a panelist in a town hall, "One UVA Health Team," last January.

"I've had a front-row seat to watch UVA bring its footprint across Northern Virginia," she recalled.

Strider joined UVA Health in 2007 and began serving as chief quality officer of UVA Community Health in 2015. In January 2024, she was named chief nursing officer of UVA Community Health, a role she'd assumed on an interim basis in July 2023.

"We know that increased access to care across all of our communities is really the key to improving health across Virginia," Strider said.

She pointed to the numerous benefits of coordinated care, including decreased costs for patients and providers, shorter waiting times for care, and briefer hospital stays (which, in turn, reduce the risk of healthcare-acquired infections).

Strider and Zaidi meet nearly every day to strategize initiatives, including expansion plans. Both previously worked for Novant (she at Culpeper Medical Center, he at Haymarket and Prince William Medical Centers). Yet even their vast experience is tested by an acute shortage of providers, particularly internists in the rural areas that the community hospitals and clinics serve.

**"WE KNOW THAT INCREASED ACCESS TO CARE ACROSS ALL OF OUR COMMUNITIES IS REALLY THE KEY TO IMPROVING HEALTH ACROSS VIRGINIA."**

— MICHELLE STRIDER



**“I THINK WE’RE FORTUNATE TO BE PART OF SUCH A WELL-RESOURCED, INTERNATIONALLY KNOWN HEALTH SYSTEM WHERE WE OFFER THE BEST OF EVERYTHING TO OUR PATIENTS.”**

— DR. ZAN ZAIDI

“In order to be there for our community, we have to continue to expand access, and one way is through the recruitment of primary care physicians,” Strider said. “We still have areas of our footprint where the patient-to-provider ratio is nearly double what it is in other parts of the U.S.—sometimes, close to triple.”

Dr. Zaidi’s parents, both physicians, worked in the same community for 40 years. Today, doctors are in such high demand that he believes “you have to recruit harder than your competition” and create a culture “to make this a final stop for our providers.” The efficiency of coordinated care is an incentive for practitioners.

They are making progress. Strider mentioned two new staff members who chose to work at Prince William Medical Center. One was a safety attendant with plans to become an RN and then a nephrologist, who had had a kidney transplant at UVA Health University Medical Center; the second, who works in the ICU, cited his experience as the parent of two children who had undergone cardiac surgery, also in Charlottesville. For Strider, their choice of UVA Community Health validates the appeal of UVA Health as a workplace. It suggests that people are starting to see UVA Health hospitals and clinics statewide as one entity.

“Our community is already connecting the UVA name to the services provided within the other facilities,” she said. “I thought that was an extraordinary testament to the fact that the community sees this as an extension of UVA.”

As integrated as the system has become, all contributions to community hospitals stay local. Private philanthropy plays a crucial role in bolstering capacity and expanding outreach to additional communities.

“Access to care means that people in all communities are able to take advantage of world-class care, regardless of what ZIP code we live in,” Strider said. “Coordinated care is the only avenue to do that.”

As his tenure with the community hospitals approaches the halfway point of his parents’, Dr. Zaidi sounds like he is just getting started. “I think we’re fortunate to be part of such a well-resourced, internationally known health system,” he said, “where we offer the best of everything to our patients.” ■

To learn more about UVA Community Health and the impact coordinated care has on patients at UVA Health, please contact Felicia Blow, Executive Director, UVA Community Health Foundation, and Director of Development, Community Hospitals, at [fblow@virginia.edu](mailto:fblow@virginia.edu) or 434.962.7588 or visit [giving.uvahealth.com/UVACommunityHealth](http://giving.uvahealth.com/UVACommunityHealth).

**COMMITTED TO  
COLLABORATION:**  
Michelle Strider and  
Dr. Zan Zaidi



# LIVING PROOF

*For Olivia, UVA Health Children's is a lifesaver. Expanding our NICU and PICU will save more children.*

*By Andy Levinsky*

**OLIVIA GOODWIN:**  
UVA Health Children's  
NICU and PICU patient





**“I had no idea that UVA was one of the leaders in the country in pediatrics and pediatric cardiology.”**

— MARISA GOODWIN



Olivia Goodwin as an infant in the neonatal intensive care unit

### “IT’S HER STORY.”

These are the words Marisa Goodwin uses to explain why Marisa’s 14-year-old daughter, Olivia, has known about her health condition since she was a small child. The story began when the community hospital where Marisa was scheduled to deliver her baby discovered a heart abnormality. She recalled they told her, “We don’t have a pediatric cardiologist. We’re not equipped to take you.”

Prepared to travel to any leading hospital nationwide, Marisa discovered the best option was in her backyard at UVA Health Children’s. “I had no idea that UVA was one of the leaders in the country in pediatrics and pediatric cardiology,” she said.

During her first appointment at UVA Health Children’s, a doctor told Marisa, “Don’t have lunch; you’re having this baby today.”

Diagnosed with a condition called complete heart block, Olivia had her first surgery when she was just three days old. She had another five years later and a third three years after that. Before her ninth birthday, Olivia had already had nearly half the number of surgeries the average American has in a lifetime.

“Early on, she had this strength,” Marisa recalled. “She made the decision to live at three days old, and to this day, if she makes a decision, she’s going to see it through.”

Today, Olivia is an eighth grader at Charlottesville Catholic School. She is the president of her school’s chapter of

the National Junior Honor Society, a member of the track and cross-country teams, and a competitive swimmer. In other words, she is, as her mom described her, “a regular teen.”

Olivia’s narrative would have been very different without the care she received at UVA Health Children’s. Like most members of her care team, pediatric cardiologist George McDaniel, MD, has been with her from those first few days in the Neonatal Intensive Care Unit (NICU) to the Pediatric Intensive Care Unit (PICU) today.

Had Olivia not been admitted to UVA Health Children’s, Dr. McDaniel said, “At the risk of being overly dramatic, she would have died.”

Marisa Goodwin offered a second opinion: “We owe UVA her life.”

So, when UVA Health Children’s doesn’t have the capacity to admit patients it is uniquely equipped to care for—including those with complex conditions like Olivia—the need to expand becomes imperative.

In 2022 and 2023, the NICU and PICU did not have the capacity to accommodate just over 15% of patients whose families were seeking to have them transferred to UVA Health Children’s for neonatal and pediatric care. In the first quarter of 2024, those numbers ticked up to 24% for the NICU and 36% for the PICU.

Over her 20 years at UVA Health Children’s, Karen Fairchild, MD, has seen the number of sick infants from outside hospitals that the NICU has had to turn away “steadily increasing.” A professor of pediatrics at

UVA and interim Neonatology Division Director, Dr. Fairchild cited several reasons for this situation.

First and foremost, she noted the reputation of the NICU—ranked 23rd among children’s hospitals nationally by *U.S. News & World Report*—to explain why UVA Health Children’s “has been getting a consistently high number of referrals for babies with complicated problems.” Overall, the hospital’s stature (eight other specialties among the top 50 nationwide, No. 1 children’s hospital in Virginia, and No. 6 in the mid-Atlantic) contributes to the increasing demand.

The increasing number of infants surviving with complex healthcare needs requiring a prolonged NICU stay also contributes to the limited number of openings in the unit.

“There’s absolutely an urgency in opening more beds so that we can accommodate the people that need to come here from across the commonwealth as well as the mid-Atlantic region,” said Jonathan Swanson, MD, chief quality officer for children’s services and medical director for the NICU.

*Urgency*, in reference to capacity, is a word practitioners in the NICU and PICU use frequently.

“When you walk through one of these units, there needs to be an open bed that can be staffed at the drop of a hat and take that patient in,” Dr. McDaniel said, “because barring that, they’re going to have a long transport somewhere else.” He explained that moving kids with critical conditions is inherently risky because even well-equipped transport has limited supplies and staff.



## Limited Capacity

Percentage of patients turned away due to a lack of space\*

**PICU 36%**

**NICU 24%**

\*Percentages based on the first quarter of 2024

## DEDICATED TO CARE

Every Wednesday, Dr. McDaniel attends a meeting with ICU doctors, cardiologists, surgeons, nurses, and other practitioners to discuss every patient scheduled for surgery. Together, they review data, make sure everyone in the room agrees about every case, and discuss options. Meetings like these happen at other hospitals, but Dr. McDaniel said theirs are different because of the quality and dedication of the staff and the willingness to argue their views, “sometimes vociferously and come up with what turns out to be the best approach for that patient.”

As a result, he said, decisions reflect not just an individual physician but the collective knowledge, skills, and input of perhaps a dozen preeminent specialists.

“I’ve passed up other jobs to stay on this team,” he reflected. “I can’t name a cardiac team anywhere that’s as cohesive as this one.”

For these doctors, nurses, and other members of the care team, being part of such a high-caliber organization is one of the main reasons they came to UVA Health Children’s. The benefit for a patient like Olivia is a continuity of care where many of the same staff who delivered her in the NICU and performed all three surgeries continue to treat her 14 years later. Now, the challenge is how to provide care for more children.





Olivia Goodwin preparing for surgery at UVA Health Children's in November of 2018 with her bear Nikolai

## Critical Expansion

Hundreds of children will benefit annually from the expansions of the NICU and PICU. This \$50 million effort is being substantially and generously funded by private philanthropy.

**PICU +250 More Children** *Annually*

**NICU +215 More Babies** *Annually*

**Plans are in the works** to increase the number of beds in the PICU by almost 25% and the NICU by nearly 35%. Based on historical data, each PICU bed allows for about 50 admissions a year. Professor and Fellowship Director Michael Spaeder, MD, estimates that expanding from 20 to 25 beds would mean the PICU could care for roughly 250 more children annually.

After the planned expansion in the NICU is complete, Dr. Fairchild said, "My estimate is that we could accommodate an additional 15 babies at any given time," or more than 100 more patients annually.

Beyond the ability to say yes to more families, growth will offer additional benefits once patients arrive. Expansion plans call for adding patient rooms, a new NICU industry standard allowing for better patient-family interaction and bonding. Research shows individual rooms can improve patient outcomes, thus shortening hospital stays and making space available sooner. This year, eight new private (or twin) rooms will allow parents to stay overnight with their babies.

Rooms will be equipped with beds that have the most sophisticated technology, including advanced AI and predictive modeling systems to help staff monitor patients and assess risk. Additional space will allow for lactation support as well as enhanced psychological services and child life support.

Growing the footprint of the NICU and PICU and enhancing services for patients and their families will require a significant investment. Still, Dr. Fairchild believes it is crucial to keep the NICU at UVA Health Children's among the top in the country.

"It's, of course, going to be very expensive to do it and to do it right," said Dr. Fairchild, "but we owe that to our patients and our families."



Left to right: Drs. Michael Spaeder, Karen Fairchild, and Jonathan Swanson

"Our team is outstanding, and we do tend to pull people through tight spots," said Dr. McDaniel. He believes that's why Olivia can never recall a time at UVA Health Children's when she was scared.

"UVA was always such a caring place that it never really entered my mind that this could be my last moment on earth," she said. "I always just thought that the doctors would pull us through."

At a swim meet in January, Olivia participated in six events.

had ahead of myself, but what was already behind me. ... I found myself smiling at what I had accomplished, grinning at what, a few months earlier, I had deemed impossible."

For all her progress and accomplishments, Olivia and her family, including sisters Vanessa, 11, and Monica, 9, recognize the reality inherent in her prognosis.

"She understands that without her pacemaker, she wouldn't be here," said Marisa, who is anticipating a fourth surgery for Olivia this winter. "While some plan for college, I just want to make it past our next doctor's appointment and surgery. We live like tomorrow isn't promised because, in my world, it truly isn't."

Yet Marisa knows that they came to the right place: that the research at UVA "has translated into care for Olivia," that

the goal is to give her a normal quality of life, and "that they can handle the tough cases. So, there was just this innate trust that [they] are going to do what's right for me and my kid."

The care teams in the NICU and PICU want to provide that same normal quality of life to more kids and their families. With expansion made possible through philanthropic support, Dr. Spaeder said, "We could potentially reach a day where we never had to say no to a child." ■



**"Our team is outstanding, and we do tend to pull people through tight spots."**

— DR. GEORGE MCDANIEL

"After talking through each event and how I should prepare, I felt ready," she recalled. "I walked to the blocks. In my head, all doubts had disappeared. I truly believed that I could accomplish what was set before me."

Olivia set four personal records.

"Looking back at the event, I see that I set myself up for success. I think that any thought of doubt would have impacted my performance. During the race, I never considered how much I

Learn more about UVA Health Children's NICU/PICU and how you can support this vital program by contacting Richard Long, Director of Development, UVA Health Children's, at [rlong@virginia.edu](mailto:rlong@virginia.edu), or call us at 434.924.8432 or 800.297.0102.



# UVA HEALTH'S HEROES of INNOVATION

*UVA's pediatric predictive analytics technology is improving patient outcomes.*

By **Andy Levinsky**



Dr. Brynne Sullivan reviews a patient's data on the HeRO monitor.

**“THE STORY REALLY STARTS WITH HeRO,”** said Jonathan Swanson, MD, describing the Heart Rate Observation (HeRO) monitor that paved the way for UVA Health to become a pioneer in predictive analytics.

The device detects abnormal heart rate patterns commonly associated with sepsis in preterm infants. In the largest randomized clinical trial of very low birth weight preterm infants, the HeRO score was associated with a 40% decrease in sepsis-associated mortality. Dr. Swanson was a resident at UVA in 2002 when HeRO was in development, and the following year, it received FDA approval.

## “UVA COULD EASILY BE THE BASTION OF PREDICTIVE ANALYTICS IN THE FIELD OF MEDICINE.”

— DR. JONATHAN SWANSON

Then, there is the Continuous Monitoring of Event Trajectories (CoMET), which applies continuous monitoring and computer algorithms to provide a visual display of a patient's risk for experiencing a serious event over a 12-hour period. Its creator, Randall J. Moorman, MD, is a cardiologist with a PhD in mathematics.

Today, innovations developed at UVA like CoMET are in use across the U.S., while HeRO is in 27 countries. How did UVA Health end up so far ahead of the curve with predictive analytics? Michael Spaeder, MD, who joined UVA Health Children's PICU in 2015, credits pioneers like Dr. Moorman and former UVA professor Frank E. Harrell Jr., whom he calls “one of the preeminent biostatisticians in America.”

Their reputation in multiple disciplines attracted the next wave of physician-scientists like Thomas Hartka, MD (Med '10), an emergency medicine physician who is also an associate professor of mechanical and aerospace engineering, and Brynne Sullivan, MD (Med '11), whose clinical research focus includes developing and testing predictive analytics.

Dr. Sullivan is using machine learning and artificial intelligence to address the latest challenges in pediatric medicine. For example, she is researching neonatal opioid withdrawal syndrome using pulse oximetry—a noninvasive way to measure the pulse rate and the saturation of oxygen in a patient's blood—to

help medical teams determine which infants require treatment and when.

“We envision a portable device that could be applied to an at-risk infant for a short period and generate an objective score to indicate the severity of opioid withdrawal,” she explained.

The goal is to initially improve short-term outcomes, such as the length of hospital stay and readmission rates, and, ultimately, perhaps, neurodevelopment.

While discoveries lead to improved patient care and outcomes, Dr. Sullivan added, they “require significant research and development before reaching the bedside. With support from funding and infrastructure, UVA Health Children's has the ideal research team and experience to lead this work.”

Robust research programs have other benefits, such as recruiting and retaining faculty. UVA Health is a top destination for researchers seeking opportunities for interdisciplinary partnerships. Today, for example, they can reach across Grounds to the UVA School of Data Science, the first of its kind in the nation. Soon, they will have another unique resource in the Paul and Diane Manning Institute of Biotechnology. Projected to open in two years, the institute will promote collaborative science which, according to their website, will focus on “the research, development, commercialization, and manufacturing of new cellular, gene, and immunotherapies.”

Resources like these and a reputation as a research hub lead Dr. Swanson to predict that “UVA could easily be the bastion of predictive analytics in the field of medicine.” ■



# BREAKING *the* DAM

*A generous investment in Huntington's research may lead to promising treatments for neurodegenerative diseases.*

By **Katherine Ludwig**

**SINCE UVA NEUROSCIENTISTS DISCOVERED** the link between the brain and the immune system in 2015, researchers across UVA Health and worldwide have been investigating ways of leveraging this connection to treat neurologic diseases and disorders from autism to Alzheimer's. At UVA, private donors and foundations have fueled groundbreaking discoveries in this area. The research team of Scott Zeitlin, PhD, an associate professor of neuroscience at UVA School of Medicine, recently benefited from this generosity.

With visionary support from the Pelican Fund, Zeitlin and his team are uncovering the secrets of Huntington's disease (HD) and identifying new targets for combating this debilitating, fatal brain disorder. His experiments are illuminating (literally, in some cases, with fluorescent dye) how the body's innate immune responses are implicated in HD and can be harnessed to delay and mitigate HD symptoms. Beyond giving new hope to families affected by HD, Zeitlin's findings may open the floodgates for new treatments for Alzheimer's, Parkinson's, amyotrophic lateral sclerosis (ALS), and more.

## THE MYSTERY OF HUNTINGTON'S

HD causes the progressive breakdown of nerve cells in the brain. It results from a mutation in the *huntingtin* gene, which is passed down within families from generation to generation. Children of parents with HD have a 50% chance of inheriting it, but symptoms typically don't develop until adulthood. The Huntington's Disease Society of America (HDSA) estimates today that 41,000 Americans are HD symptomatic and another 200,000 are at risk of inheriting the disease. Symptoms of HD include personality changes, impaired memory and judgment, unsteady and involuntary movements, slurred speech, swallowing difficulties, and substantial weight loss. It's like having ALS, Parkinson's, and Alzheimer's simultaneously, according to the HDSA. Eventually, HD symptoms advance to a stage where those afflicted can no longer care for themselves. Most people with HD succumb to complications within 10 to 25 years of symptom onset.

Currently, there is no cure or treatment for HD—nothing to slow, stop, or reverse its progression; however, after a Columbia University geneticist and neuropsychiatrist named Nancy Wexler led the discovery of the huntingtin gene in 1993, excitement has grown that novel therapies are imminent. Zeitlin, who joined UVA School of Medicine in 2000, has been on the front lines of that search since Wexler recruited him to study HD as a postdoc at Columbia.





*“People think science happens because there are a lot of labs, and they’re working hard on a problem, and there’s a eureka moment. But what I think drives science are certain individuals, like Nancy Wexler, who can be very, very persuasive and convince others to work on the same problem as a research community—to share information and resources instead of compete with each other.”*

— SCOTT ZEITLIN

“Nancy Wexler has HD in the family, and she, herself, has it. At the time, she really wanted mouse models of the disease, and I thought that was really cool,” said Zeitlin.

Mouse models—mice developed or engineered to simulate human diseases—allow scientists to study those diseases in a lab. Zeitlin created the mouse models used by most labs investigating HD today. In 2019, he received the Hereditary Disease Foundation’s Leslie Gehry Prize for Innovation in Science. Zeitlin credits Wexler’s ability to motivate people to work on a common problem for the increased understanding and study of HD.

“People think science happens because there are a lot of labs, and they’re working hard on a problem, and there’s a eureka moment,” said Zeitlin. “But what I think drives science are certain individuals, like Nancy Wexler, who can be very, very persuasive and convince others to work on the same problem as a research community—to share information and resources instead of compete with each other.”

As a research community, Zeitlin and his neuroscience colleagues at UVA are those people, too, and combined, they are poised to make exceptional progress in understanding and treating many neurodegenerative diseases and neurodevelopmental disorders, individually and collectively. And it all started with that landmark 2015 discovery.

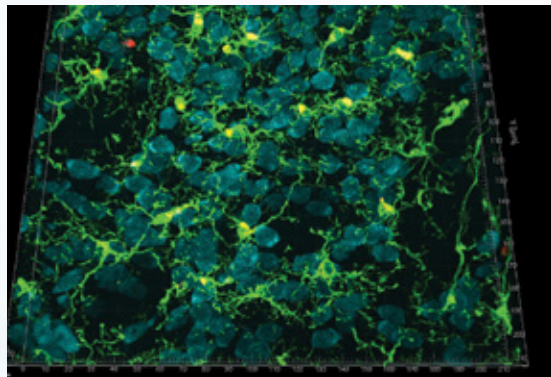
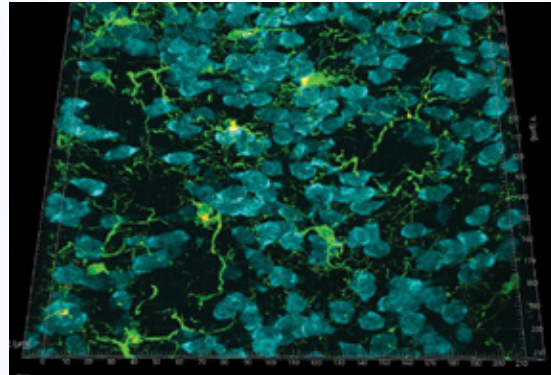
#### LEVERAGING THE MISSING LINK

When UVA researchers made the revolutionary connection between the brain and the body’s immune system, it was by uncovering a network of lymphatic vessels no one knew existed. These newly identified vessels surrounding the brain—meningeal lymphatics—send messages between the brain and the immune system and clean the brain of harmful materials. This discovery was a radical scientific leap, causing textbooks to be rewritten. It also created new possibilities for understanding and treating many brain diseases and disorders. Since then, UVA Health has substantially advanced a new field of science called *neuroimmunology*.

UVA’s pioneering researchers are not only investigating the intersection of neuroscience and immunology on an individual disease and disorder level but also collaborating to make collective progress. UVA’s Center for Brain Immunology & Glia (BIG), of which Zeitlin is a member, is a manifestation of this fertile ground on UVA Grounds. Other members of the center include neuroscientists studying Alzheimer’s, ALS, Parkinson’s, and multiple sclerosis, as well as those exploring toxoplasmosis, autism spectrum disorder, strokes, epilepsy, glioblastoma, and depression. The BIG center is a genuine brain trust from which member researchers can draw valuable transferable insights, enabling them to advance science in their individual interest areas faster.

The work of BIG center members is further amplified by UVA’s Brain Institute, a University-wide initiative established in 2016 to invest in and foster closer collaboration among neuroscientists like Zeitlin, who study the brain and its diseases and disorders in the lab, and those who conduct clinical trials of new medicines and treatments based on that research. In addition, the Harrison Family Translational Research Center in Alzheimer’s and Neurodegenerative Diseases, which will be housed in UVA’s new Paul and Diane Manning Institute of Biotechnology, will enable the rapid manufacturing and testing of those new therapies, making the laboratory-to-bedside pipeline even shorter. Construction of the institute is expected to be completed by late 2026.





Zeitlin and his research team use fluorescent tracers to study how the innate immune system responds to HD and can be harnessed to delay or mitigate symptoms. The top brain model is the control while the bottom is a mouse with HD.

*“We would not have conceived of or considered looking at the meningeal lymphatics system in the context of HD in mouse models unless we had the in-house expertise of other labs. It really is critical that you have enough people with expertise around in your immediate environment. That makes the research go much, much quicker.”*

— SCOTT ZEITLIN

The three experimental research projects the Pelican Fund supports in Zeitlin’s lab are primed to benefit from UVA’s robust and growing neuroscience infrastructure. They include:

- 1 Using fluorescent tracers (dye) to study how fluid drainage through the meningeal lymphatics is implicated in HD;
- 2 Studying the role of brain microglia (immune cells of the central nervous system) in HD;
- 3 Investigating HD’s connection to inflammasome activation, a function of the innate immune system that senses damage in the brain and triggers an inflammatory response.

Notably, the Pelican Fund’s support enabled Zeitlin to hire a postdoctoral research fellow who brings vital experience with microglia and neuroinflammation from previously working in the lab of Ukpong Eyo, PhD, a fellow BIG center member. Eyo studies the connections among microglial activity, neurodevelopment, and neurodevelopmental disorders.

“We would not have conceived of or considered looking at the meningeal lymphatics system in the context of HD in mouse models unless we had the in-house expertise of other labs,” said Zeitlin. “It really is critical that you have enough people with expertise around in your immediate environment. That makes the research go much, much quicker.”

### SUPPORT FOR TESTING THE WATERS

Funding for highly experimental laboratory studies is also critical to making discoveries happen more quickly. The generosity of UVA School of Medicine donors like the Pelican Fund accelerates science by allowing researchers to conduct high-risk/high-reward investigations that generate the necessary data to receive extensive, sustaining grants from federal funders, namely, the National Institutes of Health (NIH)—grants that facilitate more expansive preclinical and clinical studies and lead, in turn, to more effective therapeutics.

Private support continues to be crucial even when a lab has received an NIH grant because the use of those funds is so limited. “People may not realize that the NIH only allows you to spend money on certain things. So we can’t, for example, buy computer systems for imaging analysis. They won’t allow their funds to be used for purchasing software,” said Zeitlin. “But because of the Pelican Fund’s support, we were able to get an imaging analysis system in the lab to allow us to quantify all the data we’re getting in those three projects, which has been terrific.”

Something else the NIH doesn’t fund? “Paper towels,” said Zeitlin. “It’s true; I mean, you’d think that things would be set up better for science. But no.”

To the uninitiated, paper towels might not seem like serious science tools, but for wet labs, they’re an essential resource. In other words, by closing gaps in financial support for Zeitlin’s day-to-day operational needs, including staffing, equipment, and, yes, paper towels, the Pelican Fund is helping advance the understanding and treatment of HD. Without reliable funding for seemingly mundane but critical elements like these, many significant research discoveries would be thwarted or delayed.

### HOPE FOR PATIENTS AND FAMILIES

Zeitlin said the research is still at an early stage, but he hopes to identify promising targets for HD therapies to “push out the actual onset of symptoms until individuals are very, very old so they have a much longer period of high-quality life.”

That’s excellent news for those affected by HD and any brain disorders with underlying mechanisms connected to similar innate immune system pathways.

“I think if the field can find a cure for HD, it will break the dam for many other neurodegenerative diseases,” said Zeitlin. ■



Scott Zeitlin, PhD, associate professor of neuroscience, created the HD mouse models used by most labs today.

To learn more about how you can support Scott Zeitlin’s groundbreaking research and accelerate treatments for tomorrow’s patients, please contact Kelly Reinhardt, Director of Development, Neurosciences, at [ksr2h@uvahealth.org](mailto:ksr2h@uvahealth.org) or 434.962.6671, or call 800.297.0102.



# A VISION *for* *the* FUTURE

*Dean Melina Kibbe reflects on the School of Medicine's ambitious initiatives: biotechnology, research, and student scholarships.*

By **Rick Kessel**

**2023 was a groundbreaking year for UVA School of Medicine. The institution celebrated strategic hires, faculty promotions, research advances, and a surge in research funding.**

In this interview, Melina Kibbe, MD, dean of UVA School of Medicine, James Carroll Flippin Professor of Medical Science, and chief health affairs officer of UVA Health, highlights many remarkable achievements, including the school's growth in federal research grants, particularly from prestigious entities such as the National Institutes of Health (NIH). According to Dr. Kibbe, this substantial increase in support for UVA Health's medical science research programs underscores the faculty's dedication and talent. It also illustrates a belief in their ability to make transformational discoveries leading to new life-extending treatments and medications.

Dean Kibbe also emphasizes the pivotal role of private philanthropy in supporting novel research that may not immediately qualify for federal funding. She explains that by offering crucial resources for research, private donors help inspire a culture of exploration and discovery at UVA Health, propelling advances in medicine, medical technology, and clinical care. Furthermore, she emphasizes how the generosity of donors supports the education and training of the next generation of physicians and scientists.

In this conversation, Dean Kibbe highlights her pride in the institution's commitment to diversity. She details the increased representation of women and individuals historically underrepresented in medicine, which is fostering a more inclusive and innovative environment. She also explains how UVA Health's commitment to talent retention and support of endowed professorships helps maintain a low attrition rate and ensures continuity and excellence in its pursuits.







***PULSE: UVA Health recently broke ground for the new Paul and Diane Manning Institute of Biotechnology. How will this institute benefit patients who come here seeking treatment options?***

**Dr. Kibbe:** We are involved in over 600 clinical trials for new medicines right now, but we would like to be able to offer even more to the people in the commonwealth. The School of Medicine is investing in setting up a full-service clinical trials unit, and once the Manning Institute of Biotechnology opens, we aim to expand this into a statewide clinical trials unit. The idea is that the researchers will develop the therapies, and we'll have the manufacturing facility to produce human-grade therapeutics. Then, through the Clinical Trials Network, we will offer access to our patients. The preponderance of these trials are early-stage, phase 1 and phase 2 clinical trials, but we may also have some late-stage phase 3 trials available.

***PULSE: Dean Kibbe, 2023 was a milestone year for new hires and promotions. Please tell us about these new leaders.***

**Dr. Kibbe:** I am proud of the amazing new talent we've hired and promoted, including the new chairs for various departments that started this academic year, including Dr. Lu Le (Dermatology), Dr. Colin Derdeyn (Radiology), Dr. Madhusmita Misra (Pediatrics), Dr. Andrew Muck (Emergency Medicine), Dr. Matt Gurka (Public Health Sciences), and Dr. Ling Qi (Molecular Physiology). These brilliant individuals will lead us to many exciting breakthroughs in their fields. I am also proud we now have more women and individuals underrepresented in medicine on our team. Furthermore, we are doing great at retaining our outstanding talent, as we have a very low attrition rate—currently 3%—which is considerably better than the industry average.

***PULSE: In your annual "State of the School" address, you highlighted the significant rise in federal research grants. How was this accomplished?***

**Dr. Kibbe:** We had year-over-year growth of our research portfolio of 27%. The growth was largely from grants from the NIH, our largest sponsor. The growth is primarily due to the incredible work of our faculty and researchers. In my first year here, we did a deep-dive strategic analysis of our research portfolio and found that our budget sizes were smaller than some of our peers, and we were a bit shy on our number of grants per principal investigator (PI). We've been very strategic in disseminating that information and finding ways to help our faculty move ahead. So, what we discovered with this recent growth of our research portfolio is that we increased the number of grants per PI and the overall budget sizes of the grants. A small portion of the growth was due to the hiring of new faculty.

UVA School of Medicine research scientist  
Tsuyoshi Miyake

**27%**

**INCREASE IN  
RESEARCH FUNDING  
YEAR OVER YEAR**





***“Endowed professorships provide critical resources and support for our academic missions. They also fund research and afford career development for educational pursuits, so they’re vital to our success.”***

**— DEAN MELINA KIBBE**

***PULSE: How is private philanthropy helping support novel, early-stage research that may not qualify for federal grants?***

**Dr. Kibbe:** Obtaining NIH grant funding is a very rigorous process, and you need to have the right preliminary data. If an idea is at a very early stage of development, it’s less likely to be supported by an NIH grant. That’s where private philanthropy comes into play. It helps fund nascent ideas and lets investigators capture preliminary data so they can then submit for foundation and federal grants. A great example of success is the incredibly generous backing from Paul and Diane Manning, who, as well as their extraordinary gift to create the Manning Institute of Biotechnology, invested early in the artificial pancreas system through the LaunchPad for Diabetes Innovation Fund. After that initial investment, the effort landed a \$13 million NIH grant with Boris Kovatchev, PhD, as the PI. Several multicenter trials were then conducted, and one of the outcomes is a successful product called Dexcom, which automatically senses and regulates blood glucose levels. This device is now widely used and helps many people with Type 1 diabetes.

***PULSE: Please tell us about endowed professorships and why they’re essential to the School of Medicine.***

**Dr. Kibbe:** Endowed professorships are extremely important for the School of Medicine, and we are incredibly grateful to our donors for their generous support in making these a reality. It’s their way of giving back to create a permanent legacy. It’s also a tremendous

honor for our faculty to hold a named chair. It helps us recruit top-caliber people and recognize a faculty member’s body of work and accomplishments. Endowed professorships provide critical resources and support for our academic missions. They also fund research and afford career development for educational pursuits, so they’re vital to our success.

***PULSE: The School of Medicine is launching an important \$25 million student scholarship initiative. How will that impact student recruitment and help graduates overcome debt challenges after earning their degrees?***

**Dr. Kibbe:** Our vision is to become the nation’s leading public academic school of medicine, and scholarships are vital for helping us achieve this goal. We have some of the best and brightest students coming to UVA School of Medicine. With the generosity of our steadfast donors, this additional funding will help us ensure future medical leaders and innovators make UVA their first choice.

This added scholarship support will also help reduce the debt burden for many students, regardless of their finances, including those from backgrounds already underrepresented in medicine. I’ve talked with students who come here, and there is a recurring theme when I ask: How were we able to get you to come here? They often answer that we’d offered the best financial package. We are excited about working closely with our supporters to enhance this effort. ■

For more information on how to support UVA School of Medicine, please contact Chris Neal, Director of Development, School of Medicine Alumni, at [cneal@virginia.edu](mailto:cneal@virginia.edu) or 434.466.1832.





# IT TAKES a VILLAGE

*UVA School of Nursing students are learning that care goes beyond treatment and diagnosis to ensuring the health of our communities.*

*By Meghan Goff*

**Christina Feggans-Langston, MSN, RN, has a guiding mission that has remained consistent throughout her career: Nursing isn't just about treating patients. It's about caring for the community. She's been building on that commitment as a clinic nurse at the Westhaven CARES Center and a clinical nursing instructor at UVA's School of Nursing. She connects Westhaven residents with critical medical care and vital resources like food banks, job programs, and a range of social services while she helps nurture the next generation of nursing professionals.**

Born and raised in Charlottesville, Feggans-Langston grew up just two blocks from Westhaven, one of Charlottesville's first public housing developments. In grade school, it's where her friends lived, and she found herself ingrained in the vibrant neighborhood, one that was filled with protective grown-ups and extended family members who became like her own. It was there that she learned what it meant to be a community. It's a philosophy that continues to inform her work at the center's nursing clinic.

"I call it the safe haven," said Feggans-Langston. "This clinic is just a safe space for everybody."

Established in 1994, the Westhaven CARES Center provides a holistic approach to caring for residents. The center's services range from providing blood pressure

**"PEOPLE MAY NOT LOOK AT THESE SERVICES AS HEALTH, BUT EVERY MOMENT OF LIFE CAN AFFECT YOUR HEALTH IN SOME WAY."**

— CHRISTINA FEGGANS-LANGSTON

checks and sports physicals for kids to stocking a food pantry and supply closet with staples like diapers, laundry detergent, and toiletries, providing a new lens for UVA nursing students to understand the inextricable ties between community health and individual health.

"People may not look at these services as health, but every moment of life can affect your health in some way," said Feggans-Langston.

Westhaven was initially made possible by a federal grant, and subsequently, the Westhaven CARES Center was formed as a partnership between the University of Virginia School of Nursing, UVA Health, and community partners from Charlottesville's Redevelopment and Housing Authority, the Public Housing Association of Residents, and the City of Promise, among others. The faculty position has been generously supported by private philanthropy for several years, helping the community while enabling students to undergo clinical training at this location. This type of support has also funded the center and provided resources for its continued operation.

Over the last 30 years, the center has delivered vital services to this historically under-resourced area. Today, it also provides opportunities for UVA's aspiring nurses to put their knowledge into practice alongside Feggans-Langston. From conducting routine screenings to participating in neighborhood assessments, UVA nursing students are identifying community healthcare concerns and working together to uncover new solutions to address these challenges.



Christina Feggans-Langston chats with nursing student Faith Bush and a patient at the Westhaven CARES Center.



## LEARNING TO CARE

For many of these students, there can be a sharp learning curve for those who have never set foot in public housing.

“I think Christina is really good at making us feel comfortable in that space,” said Donna Nkurunziza (Nurs ’24), who was raised in Fairfax, Virginia. She also recognized, “There are a lot of stereotypes associated with living in public housing.”

Under Feggans-Langston’s instruction, undergraduate and graduate-level nursing students learn what it means to help residents navigate the complexities of the healthcare system. As part of both the Public Health Nursing and the Community Health Nursing courses, students get to see Feggans-Langston make referrals and arrange transportation to medical appointments, all while filling a variety of roles, from nutritional adviser to scheduler to social worker, which is such a valuable experience.

Nkurunziza, a bachelor’s student in Feggans-Langston’s Public Health Nursing class, is just one of the students who has witnessed the unique obstacles faced by patients managing challenging issues like food insecurity, poverty, and homelessness. At Westhaven, Nkurunziza became aware of the challenges that residents face, which are often as basic as food shopping.

Whether the students are learning by doing at the center, interacting with patients in their home environments, or familiarizing themselves with the neighborhood on a walking tour led by Feggans-Langston, the impact of their work is evident.

“The collaboration at the Westhaven CARES Center is a great model and framework for how multiple partners can work cohesively to improve individual and community health,” said Tracy M. Downs, MD, FACS, chief diversity & community engagement officer for UVA Health.

After graduation, Nkurunziza plans to return to Fairfax, where she aspires to be a

labor and delivery nurse. However, due to her experience at Westhaven, her perspective of community health has changed.

“Now I have a new frame of reference to ask myself key questions like, ‘How are we following up with their care so that they don’t end up back in the hospital?’” she said.

Similarly, growing up in Winchester, Virginia, School of Nursing student Connor Brumbaugh (Nurs ’24) also knew little about Charlottesville and the challenges residents face in public housing. He made it a personal project to learn as much as he could about the city’s history when he moved here.

“I loved my experience at Westhaven,” said Brumbaugh, a Public Health Nursing student.

He maintains a connection even after completing the class, visiting an elderly resident to read her mail to her and chat.

Brumbaugh said his experience with the CARES Center “definitely influenced my career path. Working with the residents at Westhaven reminded me of why I got into nursing in the first place. I’m starting out in the ICU after graduation, but I would love to graduate to a community health practice someday.”

He said the experience has made him consider important questions about patients’ lives outside the hospital: “How can we help prevent future hospitalizations? Do they have the resources they need to be successful? If not, what can we do as patient advocates to try and facilitate healthy practices in the outpatient setting?”

For Feggans-Langston, watching students learn by interacting with the community is a testament to the value of community clinics like the Westhaven CARES Center. And while their nursing careers may take them in different directions, each student leaves with a better understanding of what it means to truly care for the community.

“Watching our students connect with our communities and learn about what it means to serve these populations, that’s powerful,” said Feggans-Langston. ■



**“WORKING WITH THE RESIDENTS AT WESTHAVEN REMINDED ME OF WHY I GOT INTO NURSING IN THE FIRST PLACE.”**

— CONNOR BRUMBAUGH (NURS ’24)



**“WATCHING OUR STUDENTS CONNECT WITH OUR COMMUNITIES AND LEARN ABOUT WHAT IT MEANS TO SERVE THESE POPULATIONS, THAT’S POWERFUL.”**

— CHRISTINA FEGGANS-LANGSTON



Nursing student Franceszca Penaredondo reaches for supplies in the Westhaven CARES Center food pantry.

UVA Nursing student Donna Nkurunziza (upper right corner)

To learn more about how you can support UVA School of Nursing and its community outreach initiatives, please contact Erik W. Williams, Executive Director of Development, at [eww6j@virginia.edu](mailto:eww6j@virginia.edu) or 434.282.8491.



# HONORING *the* PATIENT EXPERIENCE

*A grateful spouse's gift pays it forward for the patient support specialists who made all the difference.*

By **Andy Levinsky**

*Malama* is a Hawaiian word meaning “to take care of,” an apt description for the relationship between Michael Turner (McIntire ’80) and his wife, Juanita (“Nita”), who wed in 1978. It also applies to the nutritionist, wound care specialist, speech therapist, and other patient support services staff assigned to the Turners when Nita was diagnosed with acute myeloid leukemia (AML) in October 2020—just a month after the couple retired to Hawaii. Mike recently made a gift to UVA Comprehensive Cancer Center to honor his late wife and help expand support services for cancer patients and their families.

Mike said Nita had always dreamed of moving to Hawaii, where the couple had vacationed for years while living in New Jersey. That dream became possible after Mike completed over 30 years as a successful investment banker and financial adviser. Yet, a month later, *kuleana malama*, roughly “a solemn responsibility,” characterized the weight on Mike’s shoulders. An oncology team in Honolulu confirmed Nita had AML following initial misdiagnoses from shingles to parasitic infectious diseases.

“I felt alone out here in Hawaii,” he said, “entrusted by her [late] parents and her surviving family to take care of her in the hospital.”

Mike also believed it was critical for Nita to seek a second opinion. “If you lose time doing the wrong treatment, the consequences could be permanent or perhaps fatal, and that alone is a good reason,” he explained.

Reaching out to his alma mater, nearly 5,000 miles away, was an easy decision. “For me, all things UVA felt familiar, safe, and trusted,” Mike explained.



Charlottesville was, after all, where Nita gave birth to their daughter, Michelle, exactly 19 years after Nita was born. Mike was a third-year undergraduate at the time.

“Classmates remember seeing us strolling Michelle around Grounds,” he recalled.

The spouse of one of those classmates, Adele Hoffmeyer, happened to be a current member (now chair) of the UVA Comprehensive Cancer Center Advisory Board. After Mike called on her, Hoffmeyer, who’d known the Turners since 1979, reached out to Cancer Center director Thomas P. Loughran Jr., MD, a renowned hematologist oncologist. She remembered that Dr. Loughran immediately agreed to talk with Mike and the doctors in Hawaii.

“He was available to help anytime and in any way he could,” said Hoffmeyer. “It was such a relief to everyone that an expert in blood cancers would be able to offer a second opinion to ensure Nita got the best care possible.”

After Dr. Loughran and Karen Ballen, MD, chief of the Division of Hematology and Oncology at UVA Health, confirmed Nita’s diagnosis, she began treatment in Hawaii. Mike said Nita’s clinical care was greatly enhanced by non-medical support services personnel, including a nutritionist who enabled her to enjoy a “regular diet,” speech therapists who helped her overcome difficulties swallowing, a wound care specialist who assisted with skin lesions and daily dressing changes, a case manager overseeing rehab, and a hospital chaplain whose concern and compassion extended beyond the patient to include her most loyal caregiver, her husband. Some taught Mike how to help care for Nita.

“No one knows how to have cancer,” said Christi Sheffield, director of Cancer Screening & Supportive Care Services. She defined cancer support services as “all of the things that patients and families need as they are getting a cancer diagnosis and traveling through active treatment and then into either long-term survivorship or end of life.”

Sheffield’s department has provided UVA Health cancer patients everything from physical, occupational, and mental health therapy to financial education and transportation assistance.

For Mike and Nita, support services went hand in hand with medical care. A balance of both, bolstered by uplifting visits from Michelle, an academic adviser at a community college in Colorado, led to encouraging news. By June 2021, just before the Turners’ 43rd anniversary, Nita was in full remission. Then, in October 2022, the side effects of Nita’s chemo treatments left her with low platelets, and she had to cancel a planned trip to Charlottesville for a UVA football game.

Commenting on Nita’s show of grace and patience upon her unexpected readmittance to the hospital, Hoffmeyer called her “the sweetest person I know,” a sentiment echoed by everyone from high school friends to neighbors and classmates at Mike’s reunions.





On Dec. 15, Nita succumbed to post-surgical complications, exacerbated by her AML history and recovery. During her treatment, nothing troubled her more than noticing patients around her who were going through the same ordeal alone, without the emotional support she had from family and friends.

Mike wanted to honor Nita's kindness and empathy for fellow patients. The Turners had a history of engagement with UVA through sporting events, class reunions, and giving programs, including the gift of an endowed athletic scholarship fund.

In considering his family's philanthropic options, Mike said he was drawn to UVA Health's support services for cancer patients. "The existence of the category alone really impressed me," said Mike, who explained that he sees a direct link between support services and medical treatment outcomes.

It's easy to understand why. Imagine a single mom who is diagnosed with cancer. Her prescription has a three-figure copay that forces her to choose between picking up her medication or paying her electric bill. She can't arrange childcare or afford transportation for an office visit. Access to financial support services may determine whether she gets care at all.

These are the kinds of logistical, mental, and emotional stresses of a cancer diagnosis that UVA Health's support services staff can help patients navigate, and that can make all the difference in their treatment and recovery. Studies published in *Frontiers in Oncology* found a relationship between chronic stress and cancer progression. In patients with cancer, stress was linked to tumor growth and a weakened immune system, which is further depleted during cancer treatment.

The Turners never took for granted that they had "a collection of resources that others may not enjoy," from comprehensive insurance to savings for retirement, said Mike.

Recognizing the universal importance of patient support services, Mike made an estate gift and immediate donation to UVA Comprehensive Cancer Center in 2023 to create the Juanita L. and Michael A. Turner Cancer Patient Care Fund.



Mike and Nita, with their daughter, Michelle

"Gifts like this are incredibly meaningful and impactful because they give us the time and space to be intentional of how we grow and where we put and prioritize our resources," Sheffield said.

There is another reason patient support services deserve philanthropic consideration. According to Blake Herring, MSN, RN, administrator of UVA Health's oncology service line, "Support care services, crucial for holistic patient care, often lack insurance reimbursement, leading to funding challenges and limited availability. Philanthropic support from individuals becomes vital, filling the financial gaps to maintain and enhance these services and ensuring all patients have access to comprehensive care beyond medical treatment. This not only supports the sustainability of support services but also promotes equity in healthcare access, highlighting the essential role of philanthropy in healthcare."

For Mike, it is fitting that the fund bearing his wife's name reflects "her caring and kind spirit" as well as their experience. He noted that he kept a diary during Nita's treatment. He said he suspected many patients and families do the same and mused that, like him, their journals "would be less about chemotherapy, blood counts, or transfusions" than "about how they felt, about their anxieties and fears and also their sources of encouragement and other forms of support." ■



*"No one knows how to have cancer."*

— CHRISTI SHEFFIELD

To learn more about cancer patient support services, please contact Corley Ralleau, Executive Director of Development, Cancer Programs, at [corley@virginia.edu](mailto:corley@virginia.edu) or 770.851.1904, or call us at 800.297.0102.



# CAPACITY *for* CARE

*With generous support, UVA's clinical cancer spaces, services, and expertise have grown to meet patients' needs across the region.*

*By Katherine Ludwig*

## UVA Comprehensive Cancer Center

### PATIENT POPULATION

*in Virginia and West Virginia*

**87** CONTIGUOUS COUNTIES

**3.2** MILLION PATIENTS

### CANCER HOSPITAL RANKINGS

*According to Newsweek*

**No. 1** IN VIRGINIA

**Top 50** NATIONALLY

**It was over a decade ago, in April 2011, that UVA Health opened the Emily Couric Clinical Cancer Center (ECCCC) adjacent to University Medical Center.** UVA alum Katie Couric had come to Charlottesville a few months earlier to dedicate the 150,000-square-foot outpatient cancer facility named for her sister, the late Virginia State Senator Emily Couric, who died from pancreatic cancer in 2001. With its patient-focused design and state-of-the-art technology, the ECCCC was a landmark achievement for UVA Health, the Commonwealth of Virginia, and the visionary UVA Cancer Center leaders, providers, and donors who made it happen.

But a lot has happened since then, especially in cancer care at UVA. Tremendous growth in specialized services and facilities, innovative research, clinical trials, robust community outreach, and cancer prevention efforts culminated in UVA being designated a National Cancer Institute (NCI) Comprehensive Cancer Center in 2022.

Under the supervision of Cancer Center Director Tom Loughran Jr., MD, the School of Medicine's F. Palmer Weber-Smithfield Foods Professor of Oncology Research and professor of medicine, UVA was the first cancer center in Virginia to meet the NCI's highest comprehensive standard and is currently among only 56 such centers nationally.

UVA Comprehensive Cancer Center's growth aligns with continued efforts to address the insidious causes and consequences of cancer among a patient population that includes 87 contiguous counties in Virginia and West Virginia and approximately 3.2 million people. Compared to national averages, this population experiences a higher incidence, mortality rate, or both with respect to breast, colorectal, lung, prostate, and skin cancer.

One of UVA Health's primary strategies for navigating this challenge over the last decade has been expanding and enhancing its physical presence throughout the region and growing its team of cancer care providers in number, specialty, and level of expertise.

Philanthropy has been and will continue to be essential to that strategy. By making gifts to support UVA's clinical cancer care and research, generous donors are a substantial reason why Newsweek recently ranked University Medical Center the No. 1 cancer hospital in Virginia and among the top 50 nationally. Here's a closer look at how UVA Health has expanded to meet the needs of Virginia's cancer patients and their families today and in the coming decades.



## HOW FAR WE'VE COME

Someone with a keen sense of UVA Health's cancer care progress before and after the ECCCC opened is Michael E. Williams, MD, ScM, the School of Medicine's Byrd S. Leavell Professor of Medicine and professor of pathology.

Dr. Williams led Emily Couric's cancer care team and has been on the front line of UVA Health's clinical cancer services and research since completing his residency and fellowship training at UVA in 1986. After two terms as chief of the Division of Hematology and Oncology, where he played a crucial role in growing the division through physician hires and the expansion of clinical research, Dr. Williams became the Comprehensive Cancer Center's associate director for clinical affairs and UVA Health's oncology service line lead in 2018. In that position, he oversaw growth in the depth and breadth of UVA's clinical cancer care.

"The opening of the Emily Couric facility, a single site where patients receive comprehensive care and see experts in their type of cancer, was a major step forward for UVA and certainly for patients across Virginia," said Dr. Williams.

At the time, however, he said the institution was still challenged by a lack of clinician-investigators and recognized the need to bring in more experts and specialists who could deliver the latest treatments to patients while continually advancing the field. Thanks to recruiting efforts, the Division of Hematology and Oncology alone has expanded from 12 physicians at the opening of the ECCCC to over 45 providers across all UVA Health cancer facilities. In addition, an increase in disease-specific surgical oncology specialists and the onboarding of radiation therapists with the most sophisticated current treatment modalities have created robust multidisciplinary teams to serve each patient's needs.

For example, a breast cancer patient may need surgery, chemotherapy, radiation therapy, or some combination. At UVA, the relevant experts collectively review the biopsy findings, molecular diagnostics, and imaging to develop

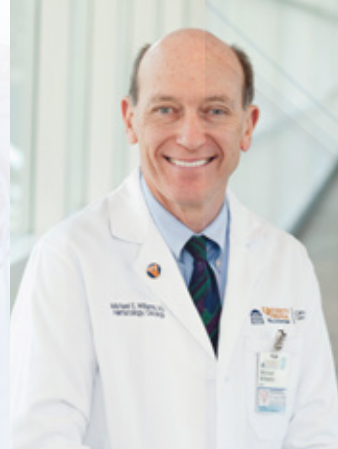
the best plan for each patient. And there are many more patients to accommodate—approximately 10% more year over year since 2011. At the ECCCC, these patients receive advanced diagnostic testing and imaging, chemotherapy and other infusions, radiation treatments, and pre- and post-operation care. They also have access to genetic counselors, social workers, nutritionists, rehabilitation specialists, and palliative care experts during their cancer care journeys.

"These patient-support services are unique to academic medical centers," said Blake Herring, MSN, administrator of the oncology service line at UVA Health.

Renovations to the ECCCC's second and fourth floors over the last four years have significantly expanded not only the number of patients who can be treated but also the complexity of cases. For example, the building can accommodate more clinical trial participants, who need longer and more extensive monitoring while undergoing investigational treatments. In addition, the ECCCC is now home to a dedicated cellular therapy clinic for outpatient stem cell transplants and chimeric antigen receptor (CAR) T-cell therapy (an advanced immunotherapy for certain blood cancers).

"These are complex therapies that typically require a seven- to 14-day hospital stay," said Herring. "Being able to offer them on an outpatient basis substantially improves patients' convenience and comfort and frees up hospital beds for other critical care needs."

Another recently added feature bestowing similar benefits is the Oncology Urgent Care Clinic, where cancer patients can get same-day medical care and avoid the hospital emergency room.



Dr. Michael E. Williams served as associate director for clinical affairs and the physician lead for oncology services from 2018 to 2024.

*"Support from donors gives clinician-investigators and basic cancer research scientists the time and resources to explore new treatments while caring for current and future patients who benefit from their discoveries."*

— DR. MICHAEL E. WILLIAMS

**MOTHER SHIP:**  
The ECCCC can now offer stem cell transplants and CAR T-cell therapy on an outpatient basis.



In addition to the ECCCC, which Dr. Williams calls “the mother ship,” UVA Health now has cancer clinics and specialty facilities across Charlottesville, including a best-in-class Breast Care Center and the Moser Radiation Therapy Center. Moreover, patients in other parts of central and northern Virginia now have access to UVA Health cancer care in their communities, including in Culpeper, Haymarket, Prince William, and Fishersville. According to Herring, expanding UVA Health’s cancer care presence throughout Virginia is a priority, which isn’t surprising considering approximately 50% of UVA’s cancer patients live 50 miles or more from Charlottesville. Herring said close coordination and consultation between providers in community clinics and physician-scientists on the leading edge of cancer care and research in Charlottesville ensure patients benefit from UVA’s world-class expertise, wherever their location.

“We want patients to be treated where they live,” said Herring. “We want standardization of care so patients get the same high-quality experience no matter where they are.”

UVA Health also recently partnered with Riverside Health System in Hampton Roads to develop local access to novel therapies being tested in clinical trials at UVA. For patients who’ve exhausted other treatment options, having access to these therapies close to home may be their best hope. UVA Cancer Center is also collaborating with community health centers in Central, Southside, and Southwest Virginia to expand cancer screening, prevention, and awareness programs for adults and children, especially in historically underserved areas.

Private donors support this growth in clinical care and support services through start-up funds for new programs and staff, endowments for faculty and their research programs, and contributions to the discretionary UVA Comprehensive Cancer Center Director’s Fund. That fund gives director Dr. Loughran the resources and flexibility to recruit and empower physician-scientists and researchers at the top of their fields—people focused on better understanding, treating, and ultimately curing all types of cancers.

“Philanthropy is a linchpin of everything we do,” said Dr. Williams. “There are a lot of gaps in the funding from the National Cancer Institute and other grantors. Support from donors gives clinician-investigators and basic cancer research scientists the time and resources to explore new treatments while caring for current and future patients who benefit from their discoveries.”

And many more patients are benefiting from access to novel treatment approaches at UVA. With increased faculty and support, UVA’s cancer-related clinical trials have gone from a handful of narrowly-focused studies in 2011 to over 100 active trials covering numerous diseases today.

“The progress in cancer care over the last decade has been nothing short of dramatic,” said Dr. Williams. Cancer immunotherapies and precision medicines, many of them developed and tested at UVA, have greatly improved patient outcomes. “As a Comprehensive Cancer Center, we now have the expertise and sophistication to discover new insights about the biologic drivers of cancer subtypes, develop and test new treatments based on those discoveries, and bring them to our patients,” he said.

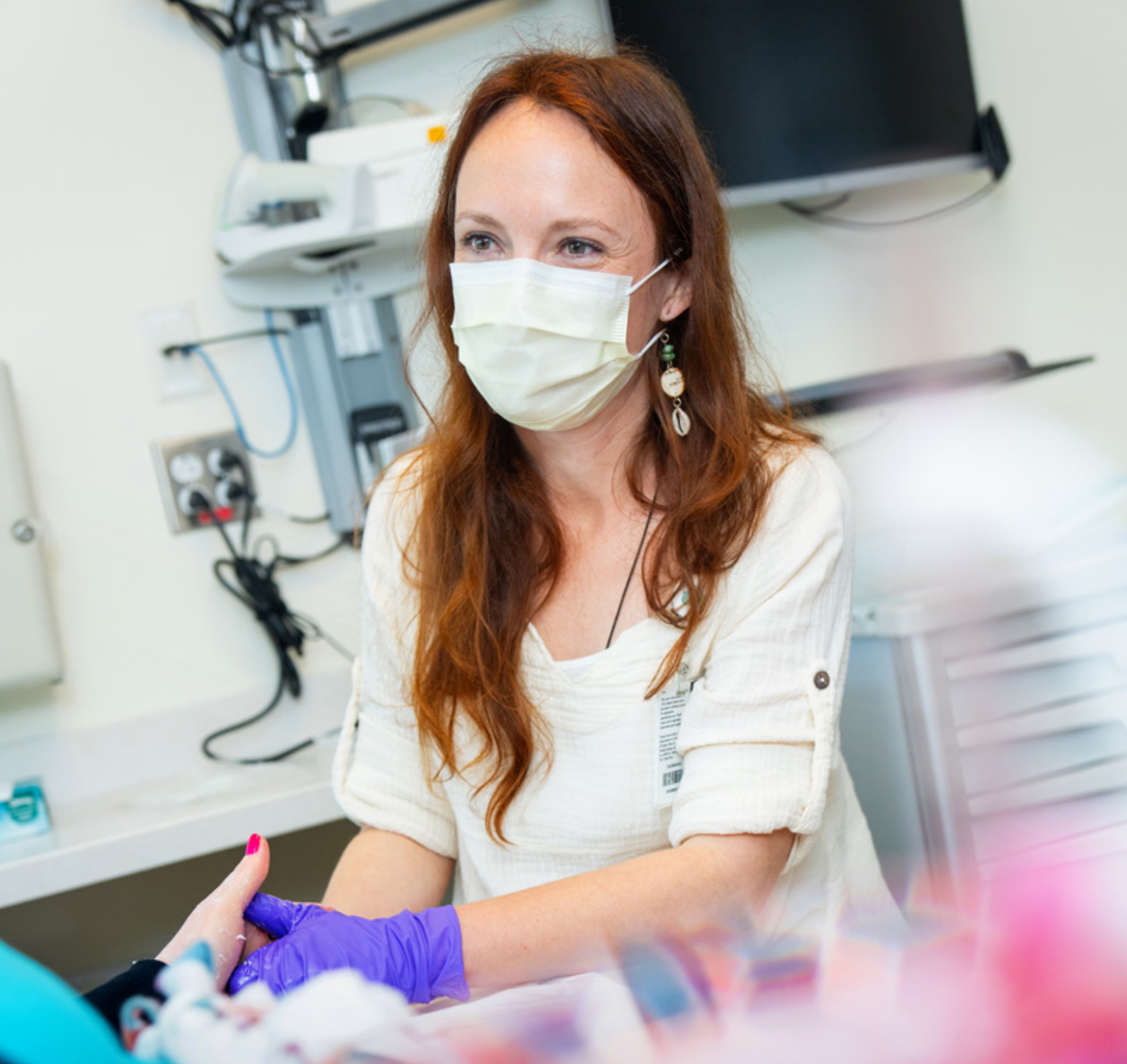


Blake Herring is the administrator of UVA Health’s oncology service line.

*“We want patients to be treated where they live. We want standardization of care so patients get the same high-quality experience no matter where they are.”*

— BLAKE HERRING





## A GENTLE TOUCH

Patient support services are an essential component of cancer care at UVA Health. These services, which are unique to academic medical centers according to Blake Herring, include, for example, genetic counseling, nutrition guidance, rehabilitation, and social work. Here, oncology physical therapist Michelle Burkett, LMT, offers a comforting massage to a patient at UVA Cancer Center Pantops.

## LOOKING AHEAD

Earlier this year, Dr. Williams stepped down from directing the Cancer Center's clinical affairs and oncology services to focus on his teaching and groundbreaking research on mantle cell lymphoma, for which he received the Lymphoma Research Foundation's inaugural 2021 Mantle Cell Lymphoma Leadership Award. After a national search, Leigh Cantrell, MD, MSPH, an expert in gynecologic malignancies and robotic surgery, was chosen as Dr. Williams's successor. Since joining UVA Health in 2010, Dr. Cantrell has held many leadership roles at UVA School of Medicine and UVA Health, including medical director of the ECCCC's ambulatory clinic since 2018 and chair of the University Medical Center's Robotics Users Group from 2011 to 2023.

Dr. Cantrell has inherited a growing enterprise, with additional clinical expansion already under way. For example, the University of Virginia Board of Visitors recently approved building out a new floor in the University Medical Center's South Tower, enabling the consolidation and expansion of necessary inpatient cancer care for the most high-risk and complex treatments. In addition, UVA Cancer Center Pantops is scheduled to open a new floor of exam rooms, 40 additional infusion chairs, and a pharmacy in early January 2025, and UVA Cancer Center Augusta in Fishersville is undergoing renovations that will nearly double the patient capacity and enhance services in the Shenandoah Valley. UVA Health is also hiring more medical oncologists and subspecialty cancer surgeons in its community clinics and pursuing additional clinical opportunities and partnerships across the commonwealth.

According to Herring, two significant U.S. cancer trends driving this expansion are (1) rising rates of cancer diagnoses at younger ages and (2) aging cancer patients. Regarding the latter, he said, "We are getting so good at treating cancer that we're seeing patients successfully treated for, say, breast cancer in their 60s and 70s, coming back 10 years later with a completely unrelated primary cancer diagnosis like lymphoma."

"Ensuring UVA Comprehensive Cancer Center has the capacity and expertise to combat the burden of cancer in Virginia and beyond is imperative," said Dr. Cantrell. "I am honored to be in this new role focused on clinical innovation, service line growth, and championing the highest-quality patient care to make UVA Health the best place to provide and receive cancer care in Virginia," she said. ■

Learn how you can support UVA Comprehensive Cancer Center's mission by contacting Corley Ralleanu, Executive Director of Development, Cancer Programs, at [corley@virginia.edu](mailto:corley@virginia.edu) or 770.851.1904, or call 800.297.0102.



**NEW LEADERSHIP:** Effective Feb. 1, Dr. Leigh Cantrell became associate director for clinical affairs at UVA Comprehensive Cancer Center and physician lead of the UVA Health oncology service line.



# A HOUSE BECOMES HOPE

*How one couple's gift transforms healthcare at UVA.*

By **Kim Wendel**

## **It's common to find Stuart Houston engaging with members of the UVA Health community—**

asking questions of young researchers at the Pediatric Research Symposium, meeting with School of Medicine leadership to learn about programs at UVA Health Children's, or attending the Child Health Research Center's Betsy and Stuart Houston Lecture, which Stuart and his late wife created with a gift in 2015.

Stuart's connection to UVA Health began when Betsy experienced a gastrointestinal hemorrhage and was airlifted from their Lexington, Virginia, home to the UVA Health University Medical Center. He credits the treatment she received with saving her life.

Stuart and Betsy became steadfast supporters of UVA Health. Their first gift provided funds that allowed medical fellows in gastroenterology and interventional radiology to travel and present their research at national conferences. Over time, they made gifts to UVA Health Children's, the UVA Midlife Health Center, and the School of Nursing—gifts that supported work in all aspects of the UVA Health mission: clinical care, education, research, and community.

This giving tradition continues with Stuart and his wife, Dawn Houston, whom he married in 2019. Dawn, a nurse practitioner who retired after a career in medical management, views healthcare through a professional lens.

"What sets UVA apart is how they connect to their patients," she said.

The Houstons experienced this firsthand when Stuart had a health scare just a month after they were married and was

***"There are many ways to make gifts of appreciated property and, by doing so, not having to recognize the [capital] gain."***

— **STUART HOUSTON**

treated at UVA. "The nurses are amazing," said Dawn. "They were amazing with him, and they were amazing with me."

"One thing that I have observed at UVA is a collegiality among the doctors, not a 'this is my patient, stay away' approach," Stuart noted. "And they take unusual care in recruiting their fellows. They want fellows who are not just good technically. They want ones who can deal with the patients."

"I can't tell you how many times you see that the patient really comes first," added Dawn.

Stuart had continued to own his former home in Lexington. When he and Dawn decided to part with the property, they donated it to support UVA Health. Stuart is a tax attorney and



Dawn and Stuart Houston

was aware of the ways donating the home could benefit both his family and UVA. "There are many ways to make gifts of appreciated property," said Stuart, "and, by doing so, not having to recognize the [capital] gain."

When the home sold, Stuart and Dawn directed the proceeds to support pediatric gastroenterology research in the lab of Dr. Sean Moore. Gastrointestinal tract health has implications related to nutrition, growth, and immunity. The project funded by the Houstons had potential benefits for people with inflammatory bowel disease in the U.S., as well as for children with environmental enteropathy in low- and middle-income countries.

And the Houstons' investment in the UVA community continues. The couple recently made a gift to purchase thermometers for UVA Continuum Home Health and a gift to create a "Joy Fund" at UVA Health Children's. The fund will be used to celebrate important milestones, holidays, and seasons with young patients and their families to normalize as much as possible their experiences on the inpatient unit.

"Gratitude and joy inspire the desire to give," said Stuart. "Dawn and I are grateful that we have the ability to make gifts that bring joy to sick children." ■



# TURN YOUR PROPERTY INTO A LEGACY

If your home, vacation property, vacant lot, farm, or office building has lost its usefulness or become expensive or cumbersome to maintain, it could fund a meaningful and tax-efficient gift to support UVA Health. Below are a few examples of the ways that individuals have benefited from making a gift of real estate:

**An outright gift of real estate, like the one made by Stuart Houston, has an immediate impact.** You will avoid the capital gains tax you would have had to pay if you had sold the property and avoid the inconvenience of selling the property yourself.

**Giving property through your will unburdens your family and provides future support to UVA Health.** An individual who had multiple investment properties didn't want to burden his heirs with the sale of the properties at the end of his lifetime—and he wanted his estate to have a philanthropic impact. Proceeds from the properties, which he left to the UVA Foundation and were sold after he passed away, benefited scholarships at the School of Nursing. The property values were excluded from the donor's taxable estate.

**A charitable remainder unitrust can turn a property into an income stream with tax benefits.** A couple who relied on the rental income from multiple properties wanted to avoid the capital gain they would have incurred if they sold them. They used two rental properties to create "Flip" Charitable Remainder Unitrusts, which pay 6% annually. And they received a charitable income tax deduction in the year of each gift. The trusts are invested with UVA's endowment, and the trust income nearly matches the former rental income. The donors no longer have the expense (and stress) of managing, maintaining, repairing, and paying property taxes. At the end of their lifetimes, the remainder of the trusts will fund a distinguished professorship at UVA.

**With a retained life estate gift, you receive a tax deduction and retain lifetime rights to your home.** A couple who planned to stay in their home for the rest of their lives wanted the Cancer Center to benefit from the value of their house. They gave the University a remainder interest in their home and received an income tax deduction for the remainder value in the year of the gift. They retained the right to live there for the rest of their lives and continued to maintain, insure, and pay taxes on the property. At the end of both their lifetimes, the property will be sold, and the proceeds will benefit the Cancer Center.

Gifts involving real estate—including those to UVA Health—are coordinated through the Office of Gift Planning in conjunction with the UVA Foundation. Before accepting a gift of real estate, the UVA Foundation conducts a due diligence process to ensure the property is appropriate for the University to own and sell. To determine if your property could make a charitable impact at UVA Health, please contact Erin Hughey-Commers, senior gift planning advisor for UVA Health, at 434-760-3281 or [efh3z@virginia.edu](mailto:efh3z@virginia.edu).

## START *your* LEGACY

*"With a Charitable Remainder Unitrust, you're able to make a gift and benefit from a good investment."*

**-Richard A. Lawson**

Rich Lawson is grateful for the "tremendous support" he and his late wife, Claudia, received from UVA's Memory and Aging Care Clinic. After Claudia passed away from Alzheimer's, Rich established a Charitable Remainder Unitrust (CRUT), the distribution of which will go to the Claudia E. Lawson Fund for Memory Care Programs at UVA Health.

The CRUT provides Rich with lifetime annual income, and the remainder will support UVA's clinical programs, research, and resources for Alzheimer's patients and caregivers. Planned gifts like Rich's can offer significant tax benefits and greater financial flexibility in meeting personal and philanthropic goals.

### MAKE A PLAN TO SUPPORT THE FUTURE OF UVA HEALTH

To learn about life income gifts and other planned giving opportunities, please contact Erin Hughey-Commers, Senior Gift Planning Advisor, UVA Health Foundation, visit [giving.uvahealth.com/gift-planning](http://giving.uvahealth.com/gift-planning), or call us at 434.760.3281 or 800.297.0102.





## THANK YOU

**As you've seen in this newly designed edition of PULSE,** there is so much life-changing work taking place across UVA Health—and so many inspirational reasons why our donors give. Our development team is honored to support the incredible work of our physicians, nurses, care teams, researchers, and students to transform health and inspire hope.

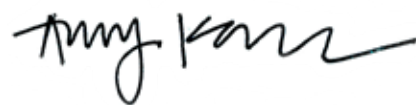
Take Olivia's story, which is this month's cover feature. Her journey, guided by the dedicated physicians and care team at UVA Health Children's, illustrates the impact of our work in providing hope for the future. Our goal is to ensure that children across Virginia can receive the same level of care that Olivia does and, most importantly, that no child is ever turned away from the acute care they need. Expanding our neonatal and pediatric intensive care units will increase our capacity to treat our region's most vulnerable and precious family members. To accomplish this, we have recently kicked off a campaign to raise \$25 million to ensure UVA Health can provide care for every seriously ill baby and child needing our help.

Scholarships open many doors for the next generation of nurses and doctors. Many donors find inspiration in helping a nursing or medical student pursue their education at UVA. Dean Melina Kibbe's announcement of a new \$25 million UVA School of Medicine scholarship initiative underscores our commitment to easing the financial burden for our medical students, who represent the future of healthcare.

We're also inspired by the School of Nursing's long legacy of care for residents of Charlottesville's Westhaven community—a program generously supported by philanthropy over the years. Today, Christina Feggans-Langston, MSN, RN, and UVA School of Nursing students at the Westhaven CARES Center not only provide vital health services to the community but also gain invaluable experience that will enrich our students' ability to deliver high-quality, compassionate care throughout their nursing careers.

I am moved by the outpouring of philanthropic support that benefits these and many other initiatives that will provide hope for patients and families for generations to come. Your vision, enthusiasm, and generosity drive our progress, and I am sincerely grateful for your partnership on this journey.

With heartfelt thanks,



**Amy Karr**  
*Senior Associate Vice President for Health Development  
Executive Director, UVA Health Foundation*



# GET INVOLVED

With our "Get Involved" fundraising platform, crafting your page is effortless. Inspire others, drive donations, and champion the causes closest to your heart.



### ELEVATE YOUR VOICE FOR UVA HEALTH!

**The Lipscomb family has raised over \$40,000 for UVA Health!**

Join them by creating and sharing your own fundraising page. It's easy to get involved and support groundbreaking patient care, research, and education at UVA Health.

**START YOUR FUNDRAISING JOURNEY TODAY!**

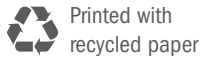






University of Virginia Health Foundation  
PO Box 800773  
Charlottesville, VA 22908-0773  
Toll-Free 800.297.0102  
Fax 434.982.1984  
pulse@virginia.edu  
giving.uvahealth.com

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HONOR  
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THE CAMPAIGN FOR THE UNIVERSITY OF VIRGINIA